

01/31/02

J1132 U.S. PATENT APPLICATION  
Assistant Commissioner for Patents  
Washington, D.C. 20231

02-05-02

HAVERSTOCK & OWENS LLP  
162 North Wolfe Road  
Sunnyvale, CA 94086  
(408) 530-9700



A

28960

PATENT TRADEMARK OFFICE  
Attorney Docket No.: HARRIS-00101

NEW APPLICATION TRANSMITTAL

Sir:

Transmitted herewith for filing is the patent application of Inventor: David M. Harris, Ph. D.

Title: METHOD OF PERIODONTAL LASER TREATMENT

CERTIFICATION UNDER 37 CFR § 1.10

I hereby certify that this New Application and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date, January 31, 2002, in an envelope bearing "Express Mail Post Office To Addressee" Mailing Label Number EV062944291US addressed to: **PATENT APPLICATION**, Assistant Commissioner for Patents, Washington, D.C. 20231.

Juan Rascon  
(Name of Person Mailing Paper)

*Juan D. Rascon*  
Signature

Enclosed are:

1. The papers required for filing date under CFR § 1.53(b):
- |           |   |          |                       |
|-----------|---|----------|-----------------------|
| <u>26</u> | Pages of Specification (including claims);                | <u>7</u> | Sheet(s) of Drawings. |
|           |   |          | <u>X</u> Formal       |
|           |   |          | - Informal            |
| <u>X</u>  | Declaration or Oath (combined with Power of Attorney)     |          |                       |
| <u>X</u>  | Power of Attorney (combined with Declaration)             |          |                       |
| -         | Assignment of the Invention to (including Form PTO-1595). |          |                       |
- Fee Calculation
- Amendment changing number of claims or deleting multiple dependencies is enclosed.

CLAIMS AS FILED

	Number Filed	Number Extra	Rate	Basic Fee
				\$740.00
Total Claims	42 - 20 =	22	\$18.00	396.00
Independent Claims	3 - 3 =	0	\$84.00	0.00
Multiple Dependent claim(s), if any			\$280.00	
			Filing Fee Calculation	\$1,136.00

6. X Applicant entitled to Small Entity Status
- 50% Filing Fee Reduction (if applicable) \$568.00
7. Other Fees
- Assignment Recordation Fee
- Other 0.00
- TOTAL FEES ENCLOSED \$568.00**

8. Payment of Fees
- X Check in the amount of \$568.00 enclosed.
9. X Authorization to Charge Additional Fees
- The Commissioner is hereby authorized to charge any additional fees (or credit any overpayment) associated with this communication and which may be required under 37 CFR § 1.16 or § 1.17 to Account No. 08-1275. An originally executed duplicate of this transmittal is enclosed for this purpose.
10. X Request for Non Publication
11. X Return Receipt Postcard

Dated: January 31, 2002

By: *Jonathan O. Owens*  
Name: Jonathan O. Owens  
Registration No.: 37,902

J1050 U.S. PTO  
10/066162  
01/31/02